

DEC 09 2002

REQUEST

FOR

CONTINUED EXAMINATION (RCE)
TRANSMITTALAddress to:
Commissioner for Patents
Box RCE
Washington, DC 20231

Application Number	09/554,567
Filing Date	September 1, 2000
First Named Inventor	Adriano Aguzzi
Art Unit	1644
Examiner Name	Jessica Roark
Attorney Docket Number	6458.US.O1

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.
Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 CFR 1.114

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a. ☐ Previously submittedi. ☐ Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered).ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____iii. ☐ Other _____b. ☒ Enclosedi. ☒ Amendment/Replyii. ☐ Affidavit(s)/Declaration(s)iii. ☐ Information Disclosure Statement (IDS)iv. ☒ Other Formal Drawings, Return Receipt Postcard

2. Miscellaneous

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)b. ☐ Other _____

3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 01-0025i. ☒ RCE fee required under 37 CFR 1.17(e)

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ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)

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740.00 CH

iii. ☐ Other _____b. ☐ Check in the amount of \$ _____ enclosedc. ☐ Payment by credit card (Form PTO-2038 enclosed)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type) Lisa V. Mueller

Registration No. (Attorney/Agent) 38,978

Signature

Date

12-05-02

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type) Wanda E. Smith

Signature

Date

12/6/02

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.



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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: A. Aguzzi, *et al.*

Serial No.: 09/554,567

Filed: September 1, 2000

For: DIAGNOSTICS AND THERAPETUICS
FOR TRANSMISSIBLE SPONGIFORM
ENCEPHALOPATHY AND METHODS
FOR THE MANUFACTURE OF NON-
INFECTIVE BLOOD PRODUCTS AND
TISSUE DERIVED PRODUCTS

Examiner: J. Roark

Group Art Unit: 1644

Case No.: 6458.US.O1

Date: November 21, 2002

CERTIFICATE OF MAILING (37 CFR
1.8 (a))

I hereby certify that this paper (along with any
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being deposited with the United States Postal
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Assistant Commissioner for Patents
Washington, D.C. 20231, on:

Date of Deposit: December 6, 2002

Wanda C Smith 12/6/02
Wanda E. Smith Date

Amendment and Response

Commissioner for Patents
Washington, D.C. 20231

Sir:

In response to the Final Office Action mailed on July 09, 2002, please amend the
above-referenced application as follows. A Request for Continued Examination
accompanies this response.

IN THE CLAIMS

Please amend the claims as follows:

35. (Amended). A method of identifying TSE-infected B cells associated with
transmissible spongiform encephalopathy in a test sample, the method comprising the
steps of:

- DI
- obtaining a test sample;
 - collecting B-cells from the test sample;